Filing Date

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Application Number

MULTIPLE DEPENDENT CLAIM **FEE CALCULATION SHEET** Substitute for Form PTO-1360 (For use with Form PTO/SB/06) May be used for additional claims or amendments AFTER SECOND AFTER FIRST CLAIMS AMENDMENT -05 **AMENDMENT** Indep Depend Depend Indep Indep Depend Indep Depend Indep Depend Depend Indep Total Total Indep Indep Total Total Depend Depend Total Total Claims

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